PAGE 1 / 10

Image# 202107279452127387

**FEC** 

# **REPORT OF RECEIPTS AND DISBURSEMENTS**

FURIVI 3A	For (	Other Than An	Authorized	Commit	tee		Office Use Or	nly
1. NAME OF COMMITTEE (in t		OR PRINT ▼		nple: If typ the lines.	ing, type	12FE4M	5	
EVERYTOWN	FEDERAL	VICTORY FU	IND			1 1 1		
ADDRESS (number and		O. BOX 4184						
Check if diffe than previous reported. (AC	sly . NI	EW YORK				NY	10163	
2. <b>FEC IDENTIFICA</b>	ATION NUMBE	ER ▼	CITY A			STATE A	ZIP	CODE ▲
C C00765354			3. IS THIS REPORT	x	NEW (N) <b>OR</b>	AN (A)	MENDED	
4. TYPE OF REP (Choose One)  (a) Quarterly Rep		Nonthly Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)		May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) 20 (M9) 20 (M10)	Nov 20 (M (Non-Election Year Only)  Dec 20 (M (Non-Election Year Only)  Jan 31 (YE
July 15 Quarterly October		(c) 12-Day PRE-Electio Report for t	n 🔲	Primary (12	PP)	General Special	(12G)	Runoff (12F
January :	Report (Q3) 31 Report (YE)	E	Election on	M = M		Y Y Y	in t	the ate of
July 31 M Report (N Year Only	Non-election	(d) 30-Day  POST-Elect  Report for t		General (30	0G)	Runoff (3	30R)	Special (30
Terminati (TER)	on Report		Election on	M = M	/ D = D /	Y   Y   Y   Y	in t Sta	the ate of
5. Covering Period	0 <u>1</u>		021	through	M M	30	2021	Y
I certify that I have ex Type or Print Name of	Br	eport and to the be rouillard, Michael, , ,	est of my know	ledge and	belief it is tru	ue, correct an	d complete.	
Signature of Treasurer	Brouillard,	Michael, , ,	I	Electronica	lly Filed] [	Date 07	22	2021
NOTE: Submission of fa	alse, erroneous,	or incomplete infor	mation may sub	oject the pe	erson signing tl	nis Report to t	ne penalties o	f 52 U.S.C. § 3(
Office Use								ORM 3X 05/2016

	FEC <b>Form 3X</b> (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	
W	Vrite or Type Committee Name		
E	EVERYTOWN FEDERAL VICTO	RY FUND	
R	Report Covering the Period: From:	01 01 2021 To:	06 30 7 2021
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1,  2021		0.00
	(b) Cash on Hand at Beginning of Reporting Period	0.00	
	(c) Total Receipts (from Line 19)	21000.00	21000.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	21000.00	21000.00
7.	Total Disbursements (from Line 31)	5683.34	5683.34
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	15316.66	15316.66
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1007.81	
	This committee has qualified as a multi	candidate committee. (see FEC FORM 1M)	
		For further information contact:	
		Federal Election Commission 999 E Street, NW	

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

# EVERYTOWN FEDERAL VICTORY FUND

R	eport Covering the Period: From:	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	06 30 / 2021							
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date							
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees									
	(i) Itemized (use Schedule A)	21000.00	21000.00							
	(ii) Unitemized	0.00	0.00							
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	21000.00	21000.00							
	(b) Political Party Committees	0.00	0.00							
	(c) Other Political Committees (such as PACs)	0.00	0.00							
12	11(a)(iii), (b), and (c)) (Carry  Totals to Line 33, page 5)  Transfers From Affiliated/Other	21000.00	21000.00							
12.	Party Committees	0.00	0.00							
13.	All Loans Received	0.00	0.00							
	Loan Repayments Received  Offsets To Operating Expenditures	0.00	0.00							
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00							
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00							
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00							
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00							
	(b) Levin Funds (from Schedule H5)	0.00	0.00							
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00							
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	21000.00	21000.00							
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	21000.00	21000.00							

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		2				
(i) Federal Share	0.00	0.00				
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating		1 1 1 1 1 1 1 1				
Expenditures	5683.34	5683.34				
(add 21(a)(i), (a)(ii), and (b))▶	5683.34	5683.34				
Transfers to Affiliated/Other Party Committees	0.00	0.00				
Contributions to Federal Candidates/Committees	0.00	0.00				
and Other Political Committees	0.00	0.00				
Independent Expenditures (use Schedule E)	0.00	0.00				
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	200	4 4				
(use Schedule F)	0.00	0.00				
Loan Repayments Made	0.00	0.00				
Loans Made	0.00	0.00				
Refunds of Contributions To: (a) Individuals/Persons Other	4 4 4 4					
Than Political Committees	0.00	0.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees (such as PACs)	0.00	0.00				
(d) Total Contribution Refunds		0.00				
(add Lines 28(a), (b), and (c))	0.00	0.00				
Other Disbursements (Including						
Non-Federal Donations)	0.00	0.00				
Federal Election Activity (52 U.S.C. § 30101(2 (a) Allocated Federal Election Activity (from Schedule H6)	(20))					
(i) Federal Share	0.00	0.00				
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add	0.00	0.00				
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5683.34	5683.34				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)						
HOTH LINE 31)	5683.34	5683.34				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	21000.00	21000.00	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21000.00	21000.00	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	5683.34	5683.34	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	5683.34	5683.34	

#### SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

I TOTT EINE INDIVIDETE.					PAGE		6	OF		10	
(check only one)											
	X	11a		11b		11c		12			
		13		14		15		16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) EVERYTOWN FEDERAL VIC	TORY FUND	
Full Name of Individual (Last, First, Middle Everytown for Gun Safety Action Fund Mailing Address PO Box 4184	Initial) or Full Organization Name	Date of Receipt
	State Zip Code	01 28 2021
City New York	State Zip Code NY 10163	Transaction ID : SA11AI.4136  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	6000.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  6000.00	
Full Name of Individual (Last, First, Middle Everytown for Gun Safety Action Find Mailing Address PO Box 4184		Date of Receipt
City New York FEC ID number of contributing federal political committee.	State Zip Code NY 10163	Transaction ID : SA11AI.4137 Amount of Each Receipt this Period
Name of Employer (for Individual)  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation (for Individual)  Aggregate Year-to-Date ▼  21000.00	Memo Item
Full Name of Individual (Last, First, Middle Mailing Address	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	21000.00
TOTAL This Period (last page this line number	er only)	21000.00

## S 17

Use separate schedule(s) (check only one) (check one) (check only one) (check one) (	S	CHEDULE B (FEC Form 3X)	Has accepted sale dula(a) FOR LIN				NE NUMBER: PAGE 7 OF 10									
Detailed Summary Page    28	IT	EMIZED DISBURSEMENTS			_ I `											
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  EVERYTOWN FEDERAL VICTORY FUND  Full Name (Last, First, Middle Initial)  A. Bank of America  Mailing Address 100 N Tryon St  City Charlottle Purpose of Disbursement Bank Fee Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial)  B. Bank of America  Mailing Address 100 N Tryon St  City Charlottle Purpose of Disbursement State:  District  Full Name (Last, First, Middle Initial)  B. Bank of America  Mailing Address 100 N Tryon St  City Charlottle Purpose of Disbursement Bank Fee  Candidate Name  Category/ Type  FEC Identification Number  Category/ Type  FEC Identification Number  Category/ Type  FEC Identification Number  Category/ Type  FEC Identification Number  Full Name (Last, First, Middle Initial)  B. Bank of America  Mailing Address 100 N Tryon St  City Charlottle Purpose of Disbursement Bank Fee  Candidate Name  Category/ Type  FEC Identification Number  FEC Identification Number  Category/ Type  FEC Identi					<b>x</b>											
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Pall)  EVERYTOWN FEDERAL VICTORY FUND  Full Name (Last, First, Middle Initial)  A. Bank of America  Mailing Address 100 N Tryon St  City Charlottie Purpose of Disbursement Solicite Sought:  House Primary General Primary General Purpose of Disbursement State: District  Full Name (Last, First, Middle Initial)  B. Bank of America  Mailing Address 100 N Tryon St  City Charlottie NC Salate Purpose of Disbursement Solicite Charlottie NC Salate Category/ Type  District  Full Name (Last, First, Middle Initial)  B. Bank of America  Mailing Address 100 N Tryon St  City Charlottie NC Salate Solicite Solicite Charlottie NC Salate Solicite Solicite Solicite Charlottie NC Salate Solicite Sol	Γ <sub>Λ</sub>															
EVERYTOWN FEDERAL VICTORY FUND  Full Name (Last, First, Middle Initial)  A. Bank of America  Mailing Address 100 N Tryon St  City Charlottle NC 28202  Purpose of Disbursement Bank Fee  Candidate Name  Office Sought: Fell Name (Last, First, Middle Initial)  Candidate Name  Office Sought: Fell Name (Last, First, Middle Initial)  Candidate Name  Office Sought: Fell Name (Last, First, Middle Initial)  Candidate Name  Office Sought: Fell Name (Last, First, Middle Initial)  Candidate Name  Office Sought: Fell Name (Last, First, Middle Initial)  Candidate Name  Office Sought: Fell Name (Last, First, Middle Initial)  Candidate Name  Office Sought: Fell Name (Last, First, Middle Initial)  Candidate Name  Office Sought: Fell Name (Last, First, Middle Initial)  Candidate Name  Office Sought: Fell Name (Last, First, Middle Initial)  Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Middle Initial) Caladgory/ Type  Office Sought: Fell Name (Last, First, Midd																
Full Name (Last, First, Middle Initial)  A. Bank of America  Mailing Address 100 N Tryon St  City		NAME OF COMMITTEE (In Full)									,					
ABank of America  Mailing Address 100 N Tryon St  City		EVERYTOWN FEDERAL VICTOR	RY FUND	)												
Mailing Address 100 N Tryon St  City	_						Data of Diahumana									
Mailing Address 10 N Tryon St	A.	Bank of America					Date of	_			_					
Charlottle NC 28202  Purpose of Disbursement Bank Fee  Candidate Name  Category/ Type  Office Sought: House Prisident Other (specify) ▼  Bank of America  Mailing Address 100 N Tryon St  City State Disbursement For: Gategory/ Type  Charlottle NC 28202  Purpose of Disbursement Mailing Address 100 N Tryon St  City State Zip Code NC 28202  Purpose of Disbursement Bank Fee  Candidate Name  Office Sought: House Prisident Disbursement For: Gategory/ Type  Office Sought: House Disbursement For: Gategory/ Type  Office Sought: House Disbursement For: Gategory/ Type  District: Full Name (Last, First, Middle Initial)  Category/ Type  FEC Identification Number  Category/ Type  FEC Identification Number  FEC Identification Number  Category/ Type  FEC Identification Number  Category/ Type  Transaction ID : SB21B.4130  Amount of Each Disbursement this Period  Transaction ID : SB21B.4130  Amount of Each Disbursement this Period  Transaction ID : SB21B.4131  Amount of Each Disbursement this Period  Transaction ID : SB21B.4131  Amount of Each Disbursement  Category/ Type  FEC Identification Number  Category/ Type  Transaction ID : SB21B.4131  Amount of Each Disbursement  Memo Item  FEC Identification Number  Category/ Transaction ID : SB21B.4131  Amount of Each Disbursement  Memo Item  Substate: District:  Substate: District: Memority General  Other (specify) ▼  Transaction ID : SB21B.4131  Amount of Each Disbursement  Memority Transaction ID : SB21B.4131  Amount of Each Disbursement  Transaction ID : SB21B.4131  Amount of Each Disbursement  Memority Transaction ID : SB21B.4131  Amount of Each Disbursement  Memority Transaction ID		Mailing Address 100 N Tryon St					02									
Purpose of Disbursement Bank Fee  Candidate Name  Category/ Type  Office Sought:		•		l .			FEC Id	entificatio	n Number	r						
Bank Fee Candidate Name  Category/ Office Sought: House Primary General General General Primary General General General Primary General Gener			NC	28202					<del></del>							
Candidate Name  Office Sought:		•			001											
Office Sought: House   Disbursement For:   Senate   President   Other (specify)   Memo Item		Candidate Name				24/			_	_	oriod					
Senate Primary General Other (specify)    State: District:  Full Name (Last, First, Middle Initial)  B. Bank of America  Mailing Address 100 N Tryon St  City Charlottle NC 28202  Purpose of Disbursement Bank Fee  Candidate Name						y/	Amoun	OI Lacii	Disbuisei	Herit tills Fe	FIIOU					
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State: District: Full Name (Last, First, Middle Initial)  B. Bank of America  Mailing Address 100 N Tryon St  City Charlottle Purpose of Disbursement Bank Fee  Candidate Name  Office Sought: House Primary Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Bank of America  Mailing Address 100 N Tryon St  Disbursement For: Senate Primary Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Bank of America  Mailing Address 100 N Tryon St  City Charlottle NC 28202  Mailing Address 100 N Tryon St  City Charlottle NC 28202  Category/ Type  Office Sought: House Obsbursement For: Senate Purpose of Disbursement Bank Fee  Candidate Name  Category/ Type  Date of Disbursement  C Transaction ID: SB21B.4131  Amount of Each Disbursement  C Transaction Number  C Transaction Number  C Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period			,					,	,							
B. Bank of America  Mailing Address 100 N Tryon St  City Charlottle Purpose of Disbursement Bank Fee Candidate Name  City Charlottle President State:  District:  City Charlottle President Bank Fee Charlottle Purpose of Disbursement State:  District:  City Charlottle President Disbursement For: Senate Primary Other (specify)  Date of Disbursement  FEC Identification Number  Category/ Type  Transaction ID: SB21B.4130 Amount of Each Disbursement this Period  Transaction ID: SB21B.4130 Amount of Each Disbursement this Period  Transaction ID: SB21B.4130 Amount of Each Disbursement Date of Disbursement  FEC Identification Number  Category/ Type  Transaction ID: SB21B.4130 Amount of Each Disbursement  Other (specify)  FEC Identification Number  Category/ Type  Date of Disbursement  FEC Identification ID: SB21B.4130 Amount of Each Disbursement  Other (specify)  FEC Identification Number  Category/ Type  Transaction ID: SB21B.4131 Amount of Each Disbursement this Period  Office Sought:  House Primary General Other (specify)  Memo Item  Substrottal of Disbursements This Page (optional)			Other (spe	city) 🔻			Me	mo Item								
Mailing Address 100 N Tryon St  City	_															
Mailing Address 100 N Tryon St  City Charlottle NC 28202  Purpose of Disbursement Bank Fee Candidate Name  District:  Full Name (Last, First, Middle Initial)  C. Bank of America  Mailing Address 100 N Tryon St  City Charlottle NC 28202  Primary General Other (specify)  Date of Disbursement Bank Fee  Condidate Name  District:  Full Name (Last, First, Middle Initial)  C. Bank of America  Mailing Address 100 N Tryon St  City Charlottle NC 28202  Purpose of Disbursement Bank Fee Candidate Name  District:  District:  FEC Identification Number  Category/ Type  FEC Identification Number  FEC Identification Number  Category/ Type  FEC Identification Number  Category/ Transaction ID: SB21B.4131  Amount of Each Disbursement  C Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Transaction ID: SB21B.4131  Memor Item  Memor Item  Substortal of Disbursements This Page (optional)	В.							_		/ / /	v -					
Charlottle NC 28202 Purpose of Disbursement Bank Fee Candidate Name  Category/ Type  Office Sought: House Disbursement For: 113.95  Senate Purpose of Disbursement For: Memorited Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement For: Memorited Date of Disbursement Date of Date of Date of Disbursement Date of Date of Date of Disbursement Date of Dat		Mailing Address 100 N Tryon St			1											
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Candidate Name  Candidate Name  Candidate Name  Office Sought: House Senate Primary General Other (specify)  State: District:  Memo Item  President State Zip Code NC 28202  Purpose of Disbursement Bank Fee  Candidate Name  Candidate Name  Candidate Name  Candidate Name  Candidate Name  Disbursement For: 113.95  Memo Item  FEC Identification Number  Candidate Name  Category/ Type  Office Sought: House Disbursement For: 190.64  State: District: Memo Item  FEC Identification Number  Category/ Type  Memo Item  FEC Identification Number  Category/ Type  Memo Item  Substraction ID: SB21B.4131  Amount of Each Disbursement this Period  Memo Item  Substraction ID: SB21B.4131  Amount of Each Disbursement this Period  Memo Item  Substraction ID: SB21B.4131  Amount of Each Disbursement this Period  Memo Item  Substraction ID: SB21B.4131  Amount of Each Disbursement this Period  Memo Item  Substraction ID: SB21B.4131  Amount of Each Disbursement this Period  Memo Item  Substraction ID: SB21B.4130  Amount of Each Disbursement this Period  Memo Item  Substraction ID: SB21B.4130  Amount of Each Disbursement this Period  Memo Item  Substraction ID: SB21B.4131  Amount of Each Disbursement this Period  Memo Item			_													
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Bank of America  Mailing Address 100 N Tryon St  City Charlottle NC 28202  Purpose of Disbursement Bank Fee  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  FEC Identification Number  Category/ Type  Office Sought: House Senate Primary General Other (specify)   State: District:  SUBTOTAL of Disbursements This Page (optional)		Bank Fee					ncostion	ID . SB2	1D 4120							
Office Sought: House Senate Primary General Other (specify)  State: District: District: Memo Item  President Senate Primary General Other (specify)  Memo Item  Date of Disbursement  Date of Disburs		Candidate Name														
Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  C. Bank of America  Mailing Address 100 N Tryon St  City Charlottle Purpose of Disbursement Bank Fee  Candidate Name  Candidate Name  Office Sought: House Primary General Other (specify)  State: District:  Memo Item  Date of Disbursement  Date of Disbursement  Total Tity Code 28202  FEC Identification Number  Category/ Type  190.64  Senate Primary General Other (specify)  Memo Item  344.08		Office Sought: House Disburse					113.95									
State: District:  Full Name (Last, First, Middle Initial)  C. Bank of America  Mailing Address 100 N Tryon St  City Charlottle Purpose of Disbursement Bank Fee  Candidate Name  Candidate Name  Office Sought: House Senate President State: District:  Substoral Disbursements This Page (optional)							7 7 7									
Full Name (Last, First, Middle Initial)  C. Bank of America  Mailing Address 100 N Tryon St  City Charlottle Purpose of Disbursement Bank Fee  Candidate Name  Candidate Name  Office Sought: House President State: District:  Substrict:  Substrict:  Date of Disbursement  Date of Disbursement  FEC Identification Number  Category/ Type  Transaction ID: SB21B.4131  Amount of Each Disbursement this Period  Memo Item  Substrict:  Substrict:  Substrict:  Memo Item		President	Other (spe	cify)		Memo Item										
Date of Disbursement  Mailing Address 100 N Tryon St  City Charlottle Purpose of Disbursement Bank Fee Candidate Name  Category/ Type  Office Sought: House Senate President State: District:  Date of Disbursement  FEC Identification Number  Category/ Type  Disbursement this Period  Memo Item  Subtrotal of Disbursements This Page (optional)	_						Wollo Rell									
City Charlottle Purpose of Disbursement Bank Fee Candidate Name  Office Sought: House President State: District:  State Xip Code 28202  FEC Identification Number  Category/ Type  Category/ Type  Memo Item  Subtrotal of Disbursements This Page (optional)	C.			Date o	f Disburse	ement										
Charlottle Purpose of Disbursement Bank Fee  Candidate Name  Category/ Type  Office Sought:  House Senate Primary President State:  District:  Substitute  Substitute  NC 28202  C  Category/ Type  Category/ Type  Category/ Type  Memo Item  Substitute  Substitute  Memo Item  344.08		Mailing Address 100 N Tryon St														
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SCHEDULE B (FEC Form 3X)	T		FOR LIN	LINE NUMBER: PAGE 8 OF 10									
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SCHEDULE	B (FEC Form 3X)			FOR LINE	LINE NUMBER: PAGE 9 OF 10								
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# SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 10 OF
FOR LINE NUMBER:
(check only one)

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X	10

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NAME OF COMMITTEE (In Full) **EVERYTOWN FEDERAL VICTORY FUND** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Accounting Services Geller Advisors Mailing Address 909 3rd Ave 16th FI City State Zip Code New York NY 10022 Outstanding Balance Beginning This Period Transaction ID: SD10.4134 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1007.81 1007.81 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period

1)	SUBTOTALS This Period This Page (optional)		7	_	_	7		1007.81	
2)	TOTALS This Period (last page this line number only)	Ξ	7	Ξ	Ξ	<del>-</del>	Ξ	1007.81	
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	_	7		Ξ	_	Ξ	0.00	
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	Ξ	7	Ξ	_	<del>-</del>	Ξ	1007.81	